## NEW EMPLOYEE INDOCTRINATION CHECK LIST

SUPPORTING DIRECTIVE BUPERSINST 5300.10A EMPLOYEE'S NAME: SUSPENSE DATE: DEPARTMENT/BRANCH: DATE EMPLOYED: JOB TITLE: GRADE: CLASSIFICATION: POSITION: **INSTRUCTIONS:** First-line supervisors are responsible for job induction for new employees in all employment categories. This process should be accomplished within five working days after the new employee reports for duty. Return completed form to the Personnel Office no later than the suspense date shown above. ORIENTATION ITEMS N/A YES 1. Explain mission of the Non-Appropriated Fund Instrumentalities (NAFI). 2. Explain employee's duties, responsibilities and employment category. Explain hours of work, time recording and meal periods. 4. Explain pay and deductions. When is pay day? Explain requirement for all employees to sign up for EFT. 5. Explain overtime regulations in detail. 6. Explain security rules, ID badges, Name Tags, etc. 7. Explain all types of leave and eligibility. Remind new hires that they cannot use annual leave for 90 days. 8. Explain allowances (LQA, Post, etc.) 9. Equal Employment Opportunity Policy and Processes. 10. Employee Relations (Grievances, Appeals, Labor Relations, etc.) 11. Explain Safety Rules/Fire prevention. 12. Explain incentive awards, special achievement awards and quality step increases. Explain Merit Promotion Program (promotions, transfers, etc.)

## NEW EMPLOYEE INDOCTRINATION CHECK LIST (Continued)

SUPPORTING DIRECTIVE BUPERSINST 5300.10A ORIENTATION ITEMS (Continued) YES N/A 15. Bulletin board. 16. Employee privileges. (use of NAFI facilities, etc.) 17. Physical examinations. 18. Standards of Conduct. 19. Employee benefits. (insurance, retirement, etc.) 20. Probationary period. 21. Resignations, Notice of. 22. Reasons for termination. 23. Training/Departmental opportunities. 24. Telephone and computer usage and policy. 25. Local facilities (eating, banking, parking, etc.) 26. Uniforms - Maintenance of - What happens to them when employee leaves. 27. Introduce employee to co-workers. Items checked have been covered with I have received instructions in the employee individually or in group above subjects and feel I have a good meetings. understanding of the policies and regulations pertaining to me. SIGNATURE OF SUPERVISOR (DATE) SIGNAURE OF EMPLOYEE (DATE) SIGNATURE OF DEPARTMENT HEAD (DATE) SIGNATURE OF PERSONNEL REPRESENTATIVE (DATE)